Triangle CofE Primary School

Asthma Policy

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Last Reviewed July 2026

Next Review Due July 2028

1. INTRODUCTION

Asthma is the most common chronic condition affecting one in eleven children. On average there are two children with asthma in every classroom in the UK and over 25,000 emergency hospital admissions a year.

2. THE SCHOOL

Triangle C of E school recognises that asthma is a widespread, serious but controllable condition and we welcome all pupils with asthma. When a child joins the school, parents and carers will complete a medical form, to identify medical needs.

If a child or young person has asthma this will be documented on the medical tracker, and class cohort sheet. Every asthmatic child should have a reliever inhaler and spacer (if they require one) in school. This will be stored in the classroom in the labelled first aid cupboard. The medical form will include parental consent for staff to administer medicine, and for the child to access the emergency inhaler if needed. The school recognises that pupils always need immediate access to reliever inhalers including all out of school activities. These can be kept in a small bag/ rucksack or box.

Children with asthma are encouraged to take control of their condition and feel confident in the support they receive from school. In case of an emergency where a child is unable to self-administer their inhaler all staff should feel confident in managing this situation. All staff must understand their duty of care to children in an event of an emergency.

3. RELATED POLICIES AND LEGISLATION

- Children and Families Act 2014
- Equality Act 2010
- Human Medicines Regulations 2012
- Data Protection Act 2018
- UK General Data Protection Regulation (UK GDPR)
- SEND Code of Practice: 0 to 25 years
- Supporting pupils at school with medical conditions (DfE, 2015)
- Keeping Children Safe in Education (DfE)
- First aid in schools, early years and further education (DfE)
- Supporting Pupils with Medical Conditions Policy
- First Aid Policy
- Health and Safety Policy
- SEND Policy
- Equality Policy / Equality Information and Objectives
- Safeguarding and Child Protection Policy
- Attendance Policy
- Educational Visits Policy
- Emergency Procedures Policy
- Accessibility Plan
- Staff Code of Conduct Policy

4. EXERCISE

Taking part in sports, games and activities is an essential part of school life for all pupils. The health benefits of exercise are well documented, and this is also true for children and young people with asthma. Consequently, it is vital that pupils with asthma are encouraged to participate fully in all physical education lessons. Teachers should remind pupils whose asthma is triggered by exercise, to take their reliever inhaler before the lesson, and to thoroughly warm up and down before and after exercise. The school ensures the whole environment which includes physical, social, sporting, and educational activities is inclusive and favourable to children with asthma.

5. STAFF TRAINING/AWARENESS

We ensure all school staff (teachers, teaching assistants, kitchen staff and office staff) are aware of the potential triggers and ways to minimise these signs and symptoms of a pupil's asthma and what to do in the event of an attack. The school ensures that all staff including supply teachers and support staff who come into contact with pupils with asthma know what to do in an event of an attack. This includes awareness sessions for all staff delivered at least once a year. This training is delivered in September each year with an additional top-up session accessed each February (by the school nursing team) for those staff who missed the initial training.

6. ADMINISTRATION

School has clear guidance on the administration of medicine in school – please see Medical Needs policy. The Department of Health guidance on the use of emergency salbutamol inhalers in school (DH, 2015) recommends school keep an emergency salbutamol inhaler – The inhaler should only be used for children who have a diagnosis of asthma and are prescribed a reliever inhaler. In this instance there should be a separate parental consent form (see medical form and consent). This inhaler can only be used if the pupil's own inhaler is not available to them.

School have an emergency asthma kit located in the school office, this is known by all staff and is well signposted. This kit is out of reach of children.

An additional, portable, emergency kit will also be taken on all sporting events, school trips and residentials. This is kept in the school office.

7. EMERGENCY RESPONSE

If a pupil needs to be taken to hospital a member of staff will always accompany them until a parent/carer arrives. Emergency inhalers are stored in the main school office. Yellow asthma boxes are stored in classrooms and should include:

- Labelled reliever inhaler and spacer (if necessary).
- Individual pupils' asthma care plan

8. STAFF RESPONSIBILITIES

The Lead First Aider (Headteacher) is responsible for:

- Supporting staff in an emergency
- Ensuring that inhalers are checked monthly to guarantee that replacement inhalers are obtained before the expiry date

- Ensuring that the asthma register is accurate and up to date

All staff responsibilities:

- The school emergency inhaler logbook should be completed if emergency inhaler has been used.
- Staff must inform the Lead First Aider if a school emergency inhaler has been used so that a new spacer can be ordered/replaced (if required)
- If pupils require their inhaler, then staff need to record the amount of usage and inform parents via Medical Tracker.
- All staff should be aware of which children have asthma, be familiar with the content of their individual action plan and have read the school's Asthma policy.
- All staff must ensure children have immediate access to their inhalers.
- Maintain effective communication with parents including informing them if the child has been unwell at school
- Ensure children have their medicines with them when they go on a school trip, to a P.E lesson or longer event in the school hall, e.g. show/performance.
- Be aware of children with asthma who may need extra support
- Liaise with parents, the child's healthcare professionals, SENCO and welfare officers if a child is falling behind with their work because of their condition
- Ensure all children with asthma are not excluded from activities they wish to take part in
- Parents to be informed if child/young person has used their inhaler due to asthma symptoms

9. SAFE STORAGE

Emergency medicines are readily available to children who require them at all times during the school day
Children's inhalers are stored in zip wallets inside the first aid cupboards located in each classroom.

Children whose health care professionals /parents advise the school that their child is not yet able or old enough to self-manage their condition, know exactly where to access their emergency medicines

10. ARRANGEMENTS FOR COMPLAINTS

The school works, wherever possible, in partnership with parents to ensure a collaborative approach to meeting pupil needs. All complaints are taken seriously and are heard through the school complaints procedure and detailed in the school's complaints policy (found on the school website). Equal Opportunities and Inclusion Statement Triangle c of e is committed to equality of provision and equality of opportunity and will strive to always provide this.

11. REVIEW AND MONITORING

This policy will be reviewed in September 2027
Policy agreed at the Full Governors' meeting;

Signed by Headteacher:_____
Date:

Signed by member of Governing Body: _____

Appendix 1 - Asthma Care Plan (Example)

Remember: take your reliever inhaler **before** you come into contact with any of your triggers and every 4 hours if you have a cold.

Your triggers are:

Common triggers are:

- Viruses
- Changes in weather
- House dust mites
- Animal fur, feathers and their bedding
- Foods
- Exercise
- Upset, distress, and emotions
- Smoke – cigarettes and fires

Emergency contact numbers:

Your GP's name and telephone number is:

Dr

Telephone

Additional comments or information:

Recommended websites:
www.beatasthma.co.uk
www.asthmaandlung.org.uk

Pupil photograph

beat asthma

School Asthma Management Plan

Name

Best peak flow

Date

Keep this with you at al times in school

Green Zone – Good

Your asthma is under control if:

- your breathing feels good
- you have no cough or wheeze
- your sleeping is not disturbed by coughing
- you are able to do your usual activities
- you are not missing school
- if you check your Peak Flow, it is around your best

BEST PEAK FLOW

Green Zone Action

Take your normal medications

Preventer (taken at home)

Reliever (to use in school **before exercise** if needed)

Others (taken at home)

Amber Zone – Warning

Warning signs that your asthma is getting worse:

- You had a bad night with cough or wheeze and might be tires in class
- You have a cough, wheeze or 'tight' chest and feel out of breath
- You need to use your reliever more than usual

Tell a member of staff or ask a friend to get help

Amber Zone Action

Use your spacer with the blue reliever puffer and do the following

- Take **2 puffs** of the BLUE inhaler with your spacer 1 puff at a time. Keep doing this every 10 minutes if you still have symptoms up to a total of 6 puffs
- Sit quietly where an adult can see you for 10 minutes, until you are feeling better and can go back into class
- If you feel like this again after 3-4hrs, tell a member of staff, repeat above and school should phone your parent to collect you
- School need to write how much inhaler you have used in your diary or tell your parent

IMPORTANT: If **6 puffs** of the BLUE inhaler via the spacer is not working or its effect is lasting less than **4hrs** and you have increasing wheeze or chest tightness, move to the **Red Zone**

Red Zone – Severe

If after six puffs of reliever you experience any of the following symptoms:

- You are still breathing hard and fast
- You still feel tight and wheezy
- You are too breathless to talk in a sentence
- You are feeling frightened and exhausted

Other serious symptoms are:

- Colour changes – very pale/grey/blue
- Using rib and neck muscles to breathe, nose flaring

Red Zone Action
CALL 999

- Using your spacer, keep taking 1 puff of releiver inhaler, breathing at a normal rate for 4-5 breaths, every 30 seconds until the ambulance arrives
- Stay where you are and keep calm
- If pupil becomes unresponsive and has an adrenaline pen for allergies – use it now

Additional comments or information

My spacer/inhaler is kept

Appendix 3 **School Action Plan**

Date

Name

Date of birth

Allergies

Emergency contact

Emergency contact number

Doctor's phone number

Class

What are the signs that you/your child may be having an asthma attack?

Are there any key words that you/your child may use to express their asthma symptoms?

What is the name of your/your child's reliever medicine and the device?

Does your child have a spacer device? (please tick) **Yes** ☐ **No** ☐

Does your child need help using their inhaler? (please tick) **Yes** ☐ **No** ☐

What are your/your child's known asthma triggers?

Do you/your child need to take their reliever medicine before exercise? (please tick) **Yes** ☐ **No** ☐

If YES, Warm up properly and take 2 puffs (1 at a time) of the reliever inhaler 15 minutes before any exercise unless otherwise indicated below:

Signed

Date

Print Name

Relationship to child